

Orthopaedic surgeons and podiatrists are trained differently—and that distinction matters. Patients deserve clear, accurate information about these differences and who is providing their care. Safe, high-quality care demands that a health care practitioner's scope of practice align with their education and training.

## Orthopaedic surgeons undergo comprehensive medical and surgical training, podiatrists do not

Podiatrists are primarily trained to treat and operate on the foot, with limited and inconsistent exposure to issues concerning the ankle and the soft tissue of the lower leg. Podiatrists are not trained to treat or perform surgery on the knee or the hand. By contrast, orthopaedic surgeons undergo comprehensive surgical training that encompasses the entire musculoskeletal system.

| ORTHOPAEDIC SURGEON (MD/DO)   | PODIATRIST (DPM)  |
|---|---|
| Complete a <b>five-year surgical residency</b> after they complete <b>four years of medical school</b>  | Effective 2013, a <b>three-year residency</b> is required for new podiatric graduates   |
| At least <b>1,230 surgical cases are required</b> during residency alone <sup>1</sup>   | Only <b>400 surgical cases</b> are required during residency <sup>2</sup>   |
| Surgical training encompasses the <b>body's entire musculoskeletal system</b>   | Surgical training is <b>primarily focused on the foot</b> , with varying exposure to the ankle and the soft tissue of the lower leg   |
| <b>Training standards require</b> orthopaedic surgeons to perform surgery across the musculoskeletal system, plus trauma surgery, joint reconstruction, amputations, treat athletic injuries and practice orthopaedic oncology <sup>3</sup> | <b>Training standards do not specify</b> how many ankle or leg surgeries podiatric students must perform and do not universally require high-complexity procedures like total ankle replacements  |
| Vast majority of orthopaedic surgeons complete <b>fellowship training after residency</b>   | <b>Fellowship training is not widespread</b> among podiatric residency graduates  |
| <b>Board certification</b> is available only through the American Board of Orthopaedic Surgery (ABOS) and the American Osteopathic Board of Orthopaedic Surgery (AOBOS)   | <b>No single certification standard</b> for podiatrists exists and requirements vary; hence, education, training, experience and skillset may differ from one podiatrist to the next <sup>4</sup> |

## Orthopaedic training maximizes patient health

Medical school and residency ensure orthopaedic surgeons are exposed to variety, depth and breadth of responsibility in patient care. As a result, orthopaedic surgeons develop a deep understanding of the entire musculoskeletal system, including how foot and ankle function is affected by the knee, hip, spine and rest of the body. By contrast, podiatrists receive limited training in parts of the body beyond the lower extremities, and their specific scope of practice varies by state.

## Transparency matters

An orthopaedic surgeon is a physician—i.e., a medical doctor (MD or DO)—who has undergone medical school and residency training. A podiatrist (DPM) is a graduate of a college of podiatric medicine. Using the term “physician” in reference to podiatrists is misleading because it suggests that a podiatrist received comprehensive training in an accredited medical school, which they did not. Patients deserve to know—and choose—who is providing their care.

## PATIENTS PREFER PHYSICIAN-LED CARE

**91%** say a physician's education and training are vital for optimal care

**3/4** would wait longer and pay more to be treated by a physician

## Endnotes

1. <https://www.acgme.org/globalassets/pdfs/orthopaedic-surgery-case-log-minimums-october-2024.pdf>
2. See CPME 320 - Standards and Requirements For Approval of Podiatric Medicine and Surgery Residencies 2022, at 28. Available at [https://www.acgme.org/globalassets/pfassets/programrequirements/2025-reformatted-requirements/cprresidency\\_2025\\_reformatted.pdf](https://www.acgme.org/globalassets/pfassets/programrequirements/2025-reformatted-requirements/cprresidency_2025_reformatted.pdf).
3. See ACGME Program Requirements for Graduate Medical Education in Orthopaedic Surgery July 2025. Available at: [https://www.acgme.org/globalassets/pfassets/programrequirements/2025-reformatted-requirements/cprresidency\\_2025\\_reformatted.pdf](https://www.acgme.org/globalassets/pfassets/programrequirements/2025-reformatted-requirements/cprresidency_2025_reformatted.pdf). See also Orthopaedic Surgery Minimums October 2024, ACGME Review Committee of Orthopaedic Surgery. <https://www.acgme.org/globalassets/pdfs/orthopaedic-surgery-case-log-minimums-october-2024.pdf>
4. The American Podiatric Medical Association and Council on Podiatric Medical Education recognize the American Board of Foot and Ankle Surgery (ABFAS) as the surgical board and American Board of Podiatric Medicine (ABPM) as the medical board. ABPM has offered Certification of Added Qualification (CAQ) in "Podiatric Surgery." ABFAS currently offers two certification pathways:
  - a. Foot Surgery: forefoot and soft tissues of foot.
  - b. Reconstructive Rearfoot/ Ankle (RRA) Surgery: Adds bones of hindfoot, ankle, and part of lower leg  
Students can meet requirements for RRA certification with limited experience operating on the ankle, and states do not uniformly require RRA training to perform ankle surgery.